

## DEPARTMENT OF JUSTICE FIREARMS DIVISION

## NOTICE OF NO LONGER IN POSSESSION

## **ASSAULT WEAPONS/.50 BMG RIFLES**

| Name  |                       |  |                    |                    |  |
|---|-----------------------|--|--------------------|--------------------|--|
| Address   |                       |  |                    |                    |  |
| City  |                       | State_   | Zip Code           | e                  |  |
| Date of Birth                                   |                       | CA Driver's License o                                    | or ID #            |                    |  |
| Assault Weapon/.50 B                            | MG Rifle Registration | (AWR/BMG)#   |                    |                    |  |
| This is to notify the L<br>BMG Rifle(s) describ | = -                   | e that I no longer own no                                | or possess the Ass | ault Weapon(s)/.50 |  |
| Serial Number                                   | Make                  | Model  | Caliber            | Type of Weapon     |  |
| Serial Number                                   | Make                  | Model  | Caliber            | Type of Weapon     |  |
| Serial Number                                   | Make                  | Model  | Caliber            | Type of Weapon     |  |
|   |                       | t, to the best of my knowle<br>the assault weapon(s)/.50 |                    |                    |  |
| Signature                                       |                       |  | Date               |                    |  |

Please mail this form to:
Department of Justice
Firearms Division
Firearms Licensing and Permits Unit - AWR/.50 BMG
P.O. Box 820200
Sacramento, CA 94203-0200